



Atty Dkt No. PP01393.002

2302-1393

PATENT

CERTIFICATE OF MAILING PURSUANT TO 37 CFR § 1.8

I hereby certify that this correspondence is being deposited with the United States Postal Service as first class mail in an envelope addressed to: Mail Stop After Final, Commissioner for Patents, PO Box 1450, Alexandria, VA 22313-1450 on May 24, 2004.

5/24/04 [Signature]
Date Signature

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

In Re Application of:

BARCHFELD et al.

Serial No.: 09/044,696

Filing Date: March 18, 1998

Title: **DETOXIFIED MUTANTS OF BACTERIAL
ADP-RIBOSYLATING TOXINS AS
PARENTERAL ADJUVANTS**

Examiner: S. Devi

Group Art Unit: 1645

Confirmation No.: 8826

SUPPLEMENTAL AMENDMENT AFTER FINAL

Commissioner for Patents
PO Box 1450
Alexandria, VA 22313-1450

Sir:

This paper is responsive to the Advisory Action mailed April 29, 2004 with an initial response due on or before April 20, 2004. Accordingly, a two-month extension of time is requested.

Amendments to the Specification begin on page 2 of this paper.

Amendments to the Drawings begin on page 3 of this paper.

Amendments to the Claims begin on page 4 of this paper.

Remarks begin on page 7 of this paper.

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Title: DETOXIFIED MUTANTS OF BACTERIAL ADP-
RIBOSYLATING TOXINS AS PARENTERAL ADJUVANTS

AMENDMENT TRANSMITTAL LETTER

Commissioner for Patents
P. O. Box 1450
Alexandria, VA 22313-1450

Sir:

Transmitted herewith is a response to the Advisory Action mailed April 29, 2004 in the above-referenced case:

- X Applicants request an Extension of Time for 2 months from April 20, 2004 to June 20, 2004. The fee of \$420 is enclosed.
- No additional fee is required.
- X Also enclosed: Sequence Listing with Certification and Return Postcard.

| No. of Claims After Amendment | | | Most Claims Previously Paid | | Extra Claims | | Additional Fee | | |
|---|----|---|--------------------------------|---|-----------------|---|----------------|---|-----|
| A. Total Claims | 19 | - | 20 | = | 0 | x | \$18 | = | \$0 |
| B. Ind. Claims | 1 | - | 3 | = | 0 | x | \$84 | = | \$0 |
| C. If amended to contain multiple dependent claims, add 270 | | | | | | | \$280 | = | \$0 |
| D. Total Amendment Fee (Total of A, B & C) | | | | | | | | = | \$0 |
| E. If small entity, 50% reduction of Total Amendment Fee (50% of D) | | | | | | | | = | \$0 |
| F. Total Amendment Fee (D minus E) | | | | | | | | = | \$0 |

_____ Charge \$ to Deposit Account No. 18-1648.

The Commissioner is hereby authorized to charge any fees under 37 C.F.R. §§ 1.16, 1.17 and 1.21 which may be required by this paper, or to credit any overpayment, to Deposit Account No. 18-1648.

Respectfully submitted,

Date: May 24, 04

By: *D. Pasternak*
Dahna S. Pasternak
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